

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Local Codes
Effective July 1, 2005

Local Code	Description	Maximum Fee	Payment Policy Reference
0401A	Claimant - Private transportation, per mile	State Rate	To reimburse claimant costs
0402A	Claimant - Parking	By Report	To reimburse claimant costs
0403A	Claimant - Bridge ferry tolls	By Report	To reimburse claimant costs
0405A	Claimant - Commercial fare (airlines, railroad)	By Report	To reimburse claimant costs
0406A	Claimant - Lodging (hotel/motel)	State Rate	To reimburse claimant costs
0407A	Claimant - Breakfast	State Rate	To reimburse claimant costs
0408A	Claimant - Lunch	State Rate	To reimburse claimant costs
0409A	Claimant - Dinner	State Rate	To reimburse claimant costs
0411A	Claimant - Time lost from work to attend department or self-insurer requested IME	By Report	To reimburse claimant costs
0412A	Claimant - Travel related to a department or self-insurer requested exam	State Rate	To reimburse claimant costs
0413A	Claimant - Miscellaneous travel (must specify)	State Rate	To reimburse claimant costs
0414A	Claimant - Taxi one way, or mileage	By Report	To reimburse claimant costs
0415A	Claimant - Replacement of clothing	By Report	To reimburse claimant costs
0420A	Lumbar seat support	By Report	To reimburse claimant costs
0426A	Silicone elastomer/scar conformer	By Report	To reimburse claimant costs
0440A	Weight loss program, joining fee, worker reimbursement	\$140.84	To reimburse claimant costs
0441A	Weight loss program, weekly fee, worker reimbursement	\$28.17	To reimburse claimant costs
2050A	Level 1: Chiropractic care visit (straightforward complexity)	\$37.49	Professional Services, Page 65
2051A	Level 2: Chiropractic care visit (low complexity)	\$48.02	Professional Services, Page 65
2052A	Level 3: Chiropractic care visit (moderate complexity)	\$58.49	Professional Services, Page 65
4570A	Claimant - Misc. medical supplies (must specify)	By Report	To reimburse claimant costs
0010E	Ankle weight purchase	By Report	To reimburse claimant costs
0012E	Wrist weight purchase	By Report	To reimburse claimant costs
8880H	Nursing home, rehab - ultra high (per day)	\$495.34	Facility Services, Page
8881H	Nursing home, rehab - very high (per day)	\$376.43	Facility Services, Page
8882H	Nursing home, rehab - high (per day)	\$338.57	Facility Services, Page
8883H	Nursing home, rehab - medium (per day)	\$330.35	Facility Services, Page
8884H	Nursing home, rehab - low (per day)	\$260.43	Facility Services, Page
8885H	Nursing home, extensive services (per day)	\$307.84	Facility Services, Page
8886H	Nursing home, special care (per day)	\$231.87	Facility Services, Page
8887H	Nursing home, clinically complex (per day)	\$230.53	Facility Services, Page
8888H	Nursing home, impaired cognition (per day)	\$173.22	Facility Services, Page
8889H	Nursing home, behavior only (per day)	\$171.89	Facility Services, Page
8890H	Nursing home, reduced physical function (per day)	\$186.55	Facility Services, Page
8891H	Adult family hm res. Care for inj. Work (per day)	\$186.55	Facility Services, Page
8892H	Boarding hm res. Care for inj. Worker (per day)	\$85.70	Facility Services, Page
8901H	Attendant services by department approved spouse provider (per hour)	\$11.63	Professional Services, Page 89
8902H	Nursing home or residential care (group home, boarding home)	By Report	Facility Services, Page 118

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Local Codes
Effective July 1, 2005

Local Code	Description	Maximum Fee	Payment Policy Reference
8906H	Facility hospice care (per day)	By Report	Facility Services, Page 118
8907H	Home health agency visit, RN (per day)	\$135.87	Professional Services, Page 89
8912H	Home health agency visit, RN, each additional visit (per day)	\$57.14	Professional Services, Page 89
8914H	Home modification, construction and design	By Report	Professional Services, Page 98
8915H	Vehicle modification	By Report	Professional Services, Page 98
8916H	Home modification evaluation and consultation	By Report	Professional Services, Page 98
8917H	Home/vehicle modification mileage, lodging, airfare, car rental	State Rate	Professional Services, Page 98
8918H	Vehicle modification initial evaluation or consultation	By Report	Professional Services, Page 98
8920H	Vehicle modification follow up consultation	By Report	Professional Services, Page 98
8950H	Comprehensive brain injury evaluation	\$3,782.04	Facility Services, Page
8951H	Brain injury rehab program- full day	\$675.36	Facility Services, Page
8952H	Brain injury rehab program- half day	\$405.23	Facility Services, Page
1001M	Work hardening - Evaluation, per hour (max 6 hours)	\$103.18	Professional Services, Page 59
1026M	Attending physician final report (PFR)	\$39.59	Professional Services, Page 95
1027M	Loss of earning power form (LEP)	\$17.22	Professional Services, Page 95
1028M	Review of job descriptions or job analysis, each additional review	\$33.57	Professional Services, Page 97
1037M	Physical capacities evaluation (PCE) or restrictions	\$27.54	Professional Services, Page 95
1038M	Review of job descriptions or job analysis	\$44.76	Professional Services, Page 97
1039M	Time loss notification	\$17.22	Professional Services, Page 95
1040M	Report of industrial injury or occupational disease/ report of accident (ROA)	\$34.43	Professional Services, Page 95
1041M	Application to reopen claim	\$44.76	Professional Services, Page 95
1044M	Physical medicine modality(ies) and/or procedure(s) by attending doctor not board qualified/certified in PM&R	\$39.19	Professional Services, Page 55
1045M	Performance-based physical capacities evaluation with report and summary of capacities.	\$642.24	Professional Services, Page 55
1046M	Provider mileage, per mile, when round trip exceeds 14 miles.	\$4.43	Professional Services, Page 97
1048M	Doctor's estimate of physical capacities		Professional Services, Page 96
1055M	Occupational disease history form	\$167.04	Professional Services, Page 96
1056M	Supplemental medical report (SMR)	\$22.38	Professional Services, Page 96
1057M	Opioid progress report supplement	\$27.54	Professional Services, Page 96
1061M	Claimant - per diem lodging/meals	By Report	
1063M	Attending doctor review of independent medical exam (IME)	\$34.43	Professional Services, Page 96
1064M	Initial report documenting need for opioid treatment	\$51.65	Professional Services, Page 96
1065M	Attending doctor IME review written report	\$25.82	Professional Services, Page 97
1100M	IME - Microfiche processing	\$53.53	Provider Bulletin 04-07
1101M	IME - Microfiche additional fee	\$5.36	Provider Bulletin 04-07
1104M	IME - Addendum report	\$103.19	Provider Bulletin 04-07
1106M	IME - Limited, single	\$399.93	Provider Bulletin 04-07

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Local Codes
Effective July 1, 2005

<i>Local Code</i>	<i>Description</i>	<i>Maximum Fee</i>	<i>Payment Policy Reference</i>
1108M	IME - Standard, single	\$449.13	Provider Bulletin 04-07
1109M	IME - Complex, single	\$561.39	Provider Bulletin 04-07
1111M	IME - No show fee, single examiner, standard or complex	\$191.12	Provider Bulletin 04-07
1112M	IME - Additional examiner	\$399.93	Provider Bulletin 04-07
1118M	IME - by psychiatrist	\$812.75	Provider Bulletin 04-07
1120M	IME - No show fee, psych	\$296.25	Provider Bulletin 04-07
1123M	IME - Communication issues	\$180.61	Provider Bulletin 04-07
1124M	IME - Other	By Report	Provider Bulletin 04-07
1125M	IME - Physician travel per mile; allowed when round trip exceeds 14 mi.	\$4.41	Provider Bulletin 04-07
1128M	IME - Occupational disease history	\$167.04	Provider Bulletin 04-07
1129M	IME - Extensive file review, > 10 pages of fiche, per page	\$50.57	Provider Bulletin 04-07
1130M	IME - Terminated examination	\$319.94	Provider Bulletin 04-07
1131M	IME - Out-of-state examination	By Report	
1190M	Impairment rating exam and report by attending doctor, limited	\$399.93	Professional Services, Page 78
1191M	Impairment rating exam and report by attending doctor, standard	\$449.13	Professional Services, Page 78
1192M	Impairment rating exam and report by attending doctor, complex	\$561.39	Professional Services, Page 78
1193M	Impairment rating exam and report by consultant, limited	\$399.93	Professional Services, Page 78
1194M	Impairment rating exam and report by consultant, standard	\$449.13	Professional Services, Page 78
1195M	Impairment rating exam and report by consultant, complex	\$561.39	Professional Services, Page 78
1198M	Impairment rating, addendum report	\$103.19	Professional Services, Page 78
1220M	Nurse case management phone calls, per 6 minutes	\$8.77	Professional Services, Page 94
1221M	Nurse case management visit, per 6 minutes	\$8.77	Professional Services, Page 94
1222M	Nurse case management case planning, per 6 minutes	\$8.77	Professional Services, Page 94
1223M	Nurse case management travel/wait time, per 6 minutes	\$4.31	Professional Services, Page 94
1224M	Nurse case management mileage, per mile	State Rate	Professional Services, Page 94
1225M	Nurse case management travel expenses (parking, tolls, ferry, lodging, airfare)	State Rate	Professional Services, Page 94
1226M	UR Contract: Prospective review - inpatient	Contracted	
1227M	UR Contract: Prospective review - outpatient	Contracted	
1230M	UR Contract: Retrospective outpatient review	Contracted	
1243M	UR Contract: Retrospective inpatient review without bill audit	Contracted	
2010M	Pain clinic evaluation	\$1,007.00	Facility Services, Page 119
2011M	Pain clinic treatment, per day	\$645.00	Facility Services, Page 119
2012M	Pain clinic treatment extension, per day	\$645.00	Facility Services, Page 119
2013M	Pain clinic follow up, per day	\$277.25	Facility Services, Page 119
9986M	Interpreter mileage, per mile	State Rate	Professional Services, Page 93
9988M	Group direct interpretive services including wait and form completion time provided directly between the health care or vocational provider and the claimant, per minute	\$0.80	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Local Codes
Effective July 1, 2005

Local Code	Description	Maximum Fee	Payment Policy Reference
9989M	Individual direct interpretive services including wait and form completion time provided directly between the health care or vocational provider and the claimant, per minute	\$0.80	Professional Services, Page 93
9996M	Interpreter "no show" fee when a claimant does not attend an insurer requested IME	\$48.00	Professional Services, Page 93
9997M	Document translation at insurer request	By Report	Professional Services, Page 93
0301R	Retraining, plan travel, mileage	State Rate	
0302R	Retraining, plan travel, parking	By Report	
0303R	Retraining, plan travel, bridge/ferry toll	By Report	
0304R	Retraining, plan travel, commercial transportation	By Report	
0375R	Retraining, relocation costs	By Report	
0378R	Stand Alone Job Analysis, non-VRC, per 6 minutes	\$7.99	Professional Services, Page 100
0380R	Job modification	By Report	Professional Services, Page 98
0385R	Pre-job accommodation	By Report	Professional Services, Page 98
0388R	Plan development services, non-voc	By Report	Professional Services, Page 98
0389R	Pre-job or job modification consultation, non-VRC, per 6 minutes	\$9.71	Professional Services, Page 98 & 100
0390R	Work evaluation, non-VRC, per 6 minutes	\$7.99	Professional Services, Page 100
0391R	Travel/wait time, non-VRC, per 6 minutes	\$4.40	Professional Services, Page 98 & 100
0392R	Mileage, non-VRC, per mile	State Rate	Professional Services, Page 98 & 100
0393R	Ferry charges, non-vocational	State Rate	Professional Services, Page 98 & 100
0395R	Dept of Personnel rtn to wrk svcs	By Report	
0800V	Early intervention services, VRC, per 6 minutes	\$7.99	Professional Services, Page 99
0801V	Early intervention services, intern, per 6 minutes	\$6.79	Professional Services, Page 99
0802V	Early Intervention Services Extension, VRC, per 6 minutes	\$7.99	Professional Services, Page 99
0803V	Early Intervention Services Extension intern, per 6 minutes	\$6.79	Professional Services, Page 99
0808V	Stand Alone Job Analysis, VRC, per 6 minutes	\$7.99	Professional Services, Page 100
0809V	Stand Alone Job Analysis, intern, per 6 minutes	\$6.79	Professional Services, Page 100
0810V	Assessment services, VRC, per 6 minutes	\$7.99	Professional Services, Page 99
0811V	Assessment services, intern, per 6 minutes	\$6.79	Professional Services, Page 99
0821V	Work evaluation, VRC, per 6 minutes	\$7.99	Professional Services, Page 99
0823V	Pre-job or job modification consultation, VRC, per 6 minutes	\$7.99	Professional Services, Page 99
0824V	Pre-job or job modification consultation, intern, per 6 minutes	\$6.79	Professional Services, Page 99
0830V	Plan development services, VRC, per 6 minutes	\$7.99	Professional Services, Page 99
0831V	Plan development services, intern, per 6 minutes	\$6.79	Professional Services, Page 99
0840V	Plan implementation services, VRC, per 6 minutes	\$7.99	Professional Services, Page 99
0841V	Plan implementation services, intern, per 6 minutes	\$6.79	Professional Services, Page 99
0881V	Forensic services, forensic VRC, per 6 minutes	\$9.55	Professional Services, Page 99
0882V	Testimony on VRC's own work, VRC, per 6 minutes	\$7.99	Professional Services, Page 99
0883V	Testimony on Intern's own work, intern, per 6 minutes	\$6.79	Professional Services, Page 99
0884V	AGO witness testimony, VRC, per 6 minutes	\$7.99	Professional Services, Page 99

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Local Codes
Effective July 1, 2005

<i>Local Code</i>	<i>Description</i>	<i>Maximum Fee</i>	<i>Payment Policy Reference</i>
0891V	Travel/wait time, VRC or forensic VRC, per 6 minutes	\$3.98	Professional Services, Page 99
0892V	Travel/wait time, intern, per 6 minutes	\$3.98	Professional Services, Page 99
0893V	Professional mileage, VRC, per mile	State Rate	Professional Services, Page 99
0894V	Professional mileage, intern, per mile	State Rate	Professional Services, Page 99
0895V	Air travel, VRC, intern, or forensic VRC	By Report	Professional Services, Page 99
0896V	Ferry charges (Voc)	By Report	Professional Services, Page 99
0897V	Hotel charges (Voc) [Out-of-state only]	By Report	Professional Services, Page 99
5091V	Hearing aid restocking fee	By Report	Professional Services, Page 116
5092V	Hearing aid cleaning visit	\$21.67	Professional Services, Page 116
5093V	Hearing aid repair (manf invoice required)	By Report	Professional Services, Page 116
R0310	Retraining tuition fees incl parking	By Report	To reimburse claimant costs
R0312	Retraining supplies	By Report	To reimburse claimant costs
R0315	Retraining equipment	By Report	To reimburse claimant costs
R0320	Retraining examination and license fees	By Report	To reimburse claimant costs
R0330	Retraining transportation mileage	State Rate	To reimburse claimant costs
R0332	Retraining parking	By Report	To reimburse claimant costs
R0334	Retraining bridge ferry tolls	By Report	To reimburse claimant costs
R0336	Retraining commerical transportation	By Report	To reimburse claimant costs
R0340	Retraining books	By Report	To reimburse claimant costs
R0350	Retraining other	By Report	To reimburse claimant costs
R0360	Retraining board	By Report	To reimburse claimant costs
R0370	Retraining room	By Report	To reimburse claimant costs
R0390	Retraining child care licensd 6 hr/less	By Report	To reimburse claimant costs
R0392	Retraining child care licensd 7-9 hrs ea	By Report	To reimburse claimant costs
V0028	Travel, vocational services, claimant	State Rate	To reimburse claimant costs